



CITY OF CAMBRIDGE

INSPECTIONAL SERVICES DEPARTMENT 831 MASS. AVE.
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Ranjit Singanayagam
Commissioner

Office Use Only

Amount Rec'd _____

Date Paid _____

Insp. Approval _____

Chief San. _____

TEMPORARY FOOD SERVICE APPLICATION

Name of Event: CAMBRIDGE RIVER FESTIVAL

Date of Event: June 17, 2006

Location of Event: Various locations on Memorial Drive or Flagg Street

Name of Applicant/Restaurant: _____

Address: _____ Phone No. _____

Name of Person-In-Charge _____

Provide copy of ServSafe Certificate & Restaurant permit if not a Cambridge Restaurant.

Foods To Be Served: List all foodstuffs

_____	_____
_____	_____
_____	_____

Preparation/Cooking Facilities:

At Event: Yes No Describe equipment used:

Off Site: Yes No If Yes, Where? _____

Vendors: Be sure to fill in BOTH sides of this form.

Describe means of transportation for foodstuffs: _____

Describe washing facilities for cookware & utensils: _____

Food Protection: Describe measures to protect food and maintain temperature during storage & display: _____

Refrigeration: Not required _____ Required _____

Method of refrigeration: _____

Garbage & Rubbish: Describe means for storage and disposal.

Vendor supplies own trash bags for use during the day; curbside pickup at the end of the day arranged by festival staff.

Personnel & Food Handling Practices:

Number of food handlers

Provide hand-washing facilities – describe method: _____

Hair restraints & disposal gloves are required.

Inspectors Notes: _____

